

cian might as well have gone to a department store. And further, the pharmacist, who, if he is properly trained, could probably compound nine-tenths of the mixtures thus ordered by the physician, has lost a good percentage of his profit; for he can compound the prescription much more cheaply than he can buy the mixture and dispense it, thus paying tribute to the manufacturer and to the wholesaler, if not also to the jobber. Does the physician offer any inducement to the clerk in the drug store to be a highly skilled chemist and pharmacist? If the physician is to order "ready made" medicine, why should a young man devote several years of his time and considerable of his money to the study of chemistry and pharmacy? In many instances the pharmacist knows that the mixture, the "ready-to-use" medicine ordered by the physician is no better, if indeed as good, as the preparation he could make himself, or as a similar mixture made by some other house and sold in bulk, which he can buy for a fraction of the cost, and thus make more profit. If he mixes it himself, or if he buys the identical mixture in bulk, under another name, and dispenses it as the special thing called for, which indeed it may be in all save name, he is called a rascally substituter and condemned forthwith. Let us be honest with ourselves and ask whether all the blame belongs where it is generally placed—on the shoulders of the pharmacist. There are always two sides to every shield, and if only one of them is black, the other may be very dark brown.

At the recent meetings of the American Medical Association at New Orleans and the Congress, at Washington, a number of papers were presented relating to the use of the X-rays in the treatment of lupus, epithelioma, carcinoma, etc. In all of these papers one thing at least was especially noticeable—decidedly more caution in expression than has heretofore been the case. No one can say, as yet, what the direct effect of exposure to X-ray influence actually is. It is probable that such changes as have been observed to take place following X-ray exposures are due to purely physical effects; but this has not been demonstrated. Furthermore, granting this assumption to be true, we do not know what the secondary effect of such physical changes in the cell structure may be. On the pretty well demonstrated theory that we are simply dealing with a form of radiant energy, and that the molecular absorption of this radiant energy produces changes in the molecule which again produce changes in the cell itself, we can account only for some probable alteration in structure, but cannot prophesy what the nature of such alteration will be. It seems safe to assume that the more complex cells, containing more unstable molecules, will be first effected and that normal cells, or those less complex, will be

last altered; but this is purely hypothetical. Experimenters in various places have already recorded a large number of curious facts which, so far as we are aware, have not been studied with a view of interpreting their meaning. A certain range of usefulness has already been demonstrated and that we do not propose to dispute. But it is urged that all statements in regard to "cures," or explanations of what has taken place, be made very cautiously until decidedly more light has been thrown upon the whole matter by competent students who have investigated the physical side of the problem.

It seems to be about time that attention should be called to the general directory of physicians of the United States as planned and outlined by the American Medical Association. Each State medical society is to gather the necessary data for its State; the lists should be full and complete, and each person practicing medicine within the State should be accounted for. To do this satisfactorily, only one way presents itself—the card-file system. Each State should have its card file of physicians and that file should be full and complete. It should give all necessary information regarding every physician; his date of graduation, school, date of license, addresses, specialty, society memberships, hospital appointments, etc., etc. It is the idea of the American Medical Association to encourage this effort in every way possible, to the end that such information may eventually find its way into the office of the Association, and into a general directory of the whole country that will be satisfactory. To accomplish this end the hearty coöperation of every State medical society is absolutely necessary, and for each State society to do the work with the least expenditure of money the hearty support and coöperation of every member will be required. And not only of every member, but of every physician who is not a member; for such a directory will be as useful to non-members as to members. Work on a register of physicians of California has already been begun; work on the card file of physicians, on which future registers will be based, will be begun very shortly. It is the paramount duty of each physician in the State to help along this work as much as he can. When you receive cards or blanks from the Secretary, do not throw them in the waste basket; you are only hindering the work and throwing away some of your own good money as well, for it will require the further expenditure of money to secure the information which you could give, if you do not take the few moments necessary. We are not asking you to do anybody a favor; we are simply advising you to do your plain duty, and one from which you will profit as much as anyone else.